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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Title of Invention	Antiangiogenic Agents
	Named Inventor(s)	Gregory E. Agoston, Jamshed H. Shah, K. Hunsucker, Victor S. Pribluda, Theresa M. Lavallee, Shawn J. Green, Christopher J. Herbstritt, Xiauguo H. Zhan and Anthony M. Treston
	Attorney Docket	05213-0852
	Express Mail Label No.	EL 602998020 US

<b>APPLICATION ELEMENTS</b>		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231			
1. <input type="checkbox"/> Fee Transmittal Form <small>(Submit an original, and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Applicant claims Small Entity status 3. <input checked="" type="checkbox"/> Specification, Claims, and Abstract Total Pages 86 4. <input type="checkbox"/> Drawings Total Sheets Total Pages 86 5. Oath or Declaration a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 16 completed)</small> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. (i) <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Microfiche Computer Program (Appendix)		<b>ACCOMPANYING APPLICATION PARTS</b> 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies 8. <input type="checkbox"/> Assignment: a. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) b. <input type="checkbox"/> Assignment is of record in parent application No. _____ 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney by assignee 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure Statement (IDS) PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) 15. <input type="checkbox"/> Other: _____			
16. If a <b>CONTINUING APPLICATION</b> , check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-part (CIP) of prior application Nos: <u>not yet assigned</u> filed August 21, 2001 and 60/278,250 filed on March 23, 2001 and 09/641,327 filed August 18, 2000.					
17. CORRESPONDENCE ADDRESS:  <table> <tr> <td> <b>John S. Pratt</b>            KILPATRICK STOCKTON LLP            1100 Peachtree Street            Suite 2800            Atlanta, Georgia 30309-4530         </td> <td>           By: <u>Suzanne Seavello Shope</u> Reg. No. 37,933            Suzanne Seavello Shope            Date: <b>August 24, 2001</b>            Telephone: 404-815-6500            Facsimile: 404-815-6555         </td> </tr> </table>				<b>John S. Pratt</b> KILPATRICK STOCKTON LLP 1100 Peachtree Street Suite 2800 Atlanta, Georgia 30309-4530	By: <u>Suzanne Seavello Shope</u> Reg. No. 37,933 Suzanne Seavello Shope Date: <b>August 24, 2001</b> Telephone: 404-815-6500 Facsimile: 404-815-6555
<b>John S. Pratt</b> KILPATRICK STOCKTON LLP 1100 Peachtree Street Suite 2800 Atlanta, Georgia 30309-4530	By: <u>Suzanne Seavello Shope</u> Reg. No. 37,933 Suzanne Seavello Shope Date: <b>August 24, 2001</b> Telephone: 404-815-6500 Facsimile: 404-815-6555				